## PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number

Effective January 1, 2003

10,6/2599

									11/1/			
		CLAIMS AS	(Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			75					RATE	FEE	]	RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			75 minus 20=		*	_55		X\$ 9=		OR	X\$18=	age
INDEPENDENT CLAIMS			minus 3 =		*			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=			+280=	
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2				OR		-1
CLAIMS AS AMENDED - PART II								TOTAL		OR	TOTAL OTHER	1740
		(Column 1)	(Column 2)			(Column 3)		SMALL E	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	i	OR	X\$18=	
AME	Independent	*	Minus	***		=	ļ [	X42=		OR	X84=	
Ĺ	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDEN	CLAIM		J	+140=	7-111-1	OR	+280=	
							l	TOTAL			TOTAL	
			ADDIT. FEE		JO.,	ADDIT. FEE	L					
AMENDMENT B	•	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colui HIGH NUM PREVI PAID	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	]	X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	F.CL AINA	=	1	X42=		OR	X84=	
<u> </u>	FINOT PRESE	NTATION OF IM	JETIPLE DEF	ENDEN	~		┙╽	+140=		OR	+280=	
							,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
_		(Column 1)	,	(Colu		(Column 3)	_					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	] [	X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	T CLAIM		J ∤	+140=				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
** If the entry in column 1 is less than the entry in column 2, write 0 in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  TOTAL ADDIT. FEE												
		nber Previously Pa					er fou	and in the app	propriate box	x in co	olumn 1.	